

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	FS	66621	2/29
O.I.P.E. CLASSIFIER	unmb	108231	3/5/00
FORMALITY REVIEW			4/26/00
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
" ..... Allowed      I ..... Interference  
(Through numeral)... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	2/19/01
2	✓	✓	2/19/01
3	✓	✓	2/19/01
4	✓	✓	2/19/01
5	✓	✓	2/19/01
6	✓	✓	2/19/01
7	✓	✓	2/19/01
8	✓	✓	2/19/01
9	✓	✓	2/19/01
10	✓	✓	2/19/01
11	✓	✓	2/19/01
12	✓	✓	2/19/01
13	✓	✓	2/19/01
14	✓	✓	2/19/01
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If more than 150 claims or 10 actions  
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